

## **Military Service by Transgender Persons and Persons with Gender Dysphoria**

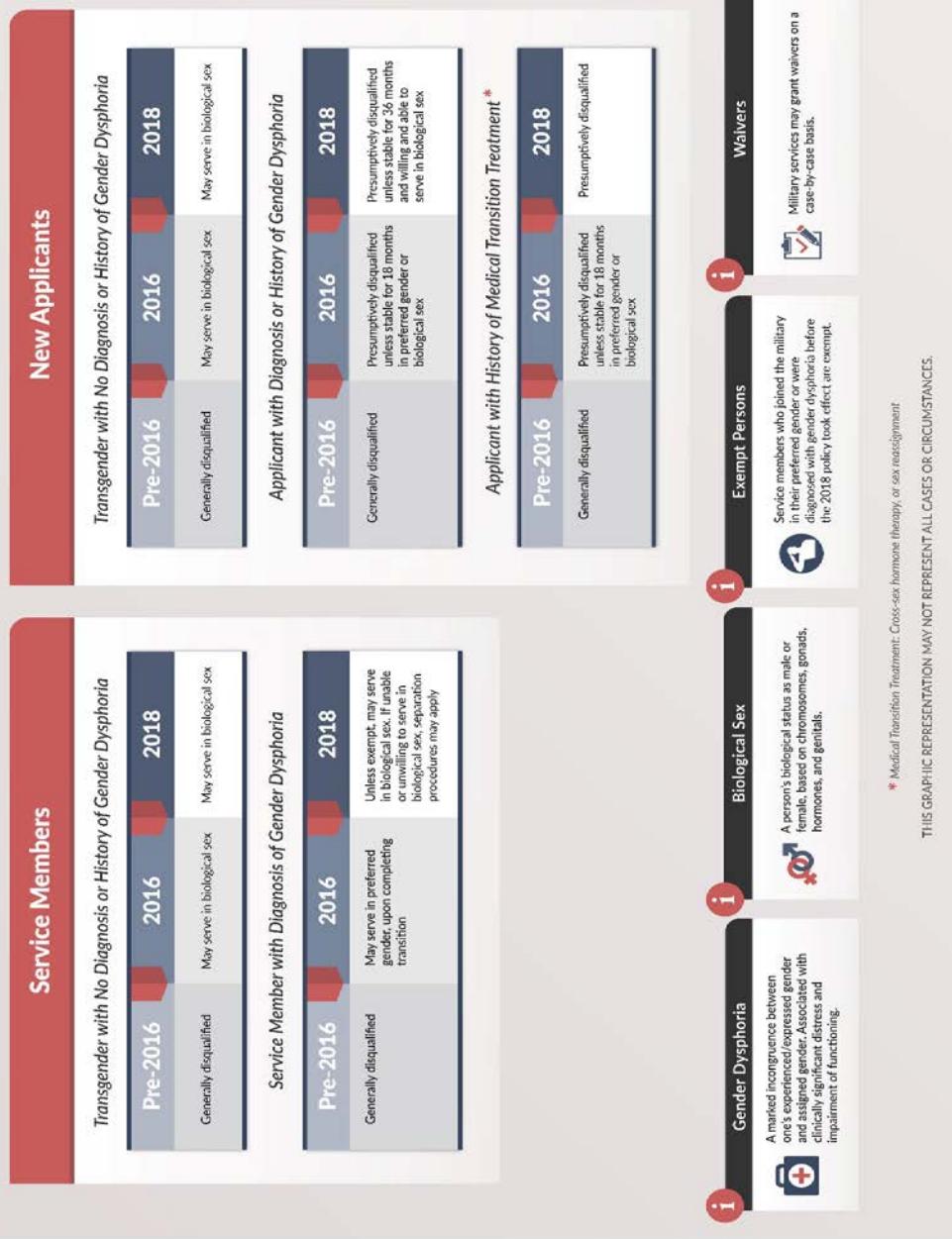
*Fact Sheet for: Military Medical Providers*

### **Things to Know:**

- The new Department of Defense policy with respect to *Military Service by Transgender Persons and Persons with Gender Dysphoria* is effective April 12, 2019.
- All persons will continue to be treated with dignity and respect.
- The new policy is NOT a ban on the accession of transgender persons. In fact, it prohibits the denial of accession or involuntary discharge solely on the basis of gender identity and ensures equal application of military standards regardless of gender identity.
- All Service members, except those who are exempt, must adhere to the standards associated with their biological sex. The new policy does not require transgender Service members to conceal their gender identity.
- Gender dysphoria is a medical condition characterized by a marked incongruence between a person's gender identity and his or her biological sex and is associated with clinically significant distress and impairment of functioning. Gender dysphoria can require significant medical treatment, including cross-sex hormone therapy and sex-reassignment surgery.
- The new policy allows persons with a history of gender dysphoria to join the military if they can demonstrate a period of 36 months of stability in their biological sex. Persons who have a history of gender dysphoria and cannot meet the stability requirements or who have a history of sex reassignment or genital reconstruction surgery are disqualified.
- Applicants who access on or after April 12, 2019 will be accessed or commissioned based on the new policy, provided they are medically qualified in all respects in accordance with DoDI 6130.03.
- Applicants who are accessed prior to April 12, 2019, and are medically qualified in their preferred gender are exempt from the new policy and subject to the standards of the 2016 policy. Service members with a diagnosis of gender dysphoria received or confirmed by a military medical provider prior to April 12, 2019, are also exempt.
- Service members who are exempt from the new policy may continue to receive all medically necessary treatment, as defined in DoDI 1300.28, to protect the health of the individual, obtain a gender marker change in the DEERS in accordance with DoDI 1300.28, and serve in their preferred gender.
- Service members who are not exempt from the new policy must adhere, like all other Service members, to the standards associated with their biological sex. These nonexempt Service members may consult with a military medical provider, receive a diagnosis of gender dysphoria, and receive mental health counseling, but may not obtain a gender marker change in DEERS or serve in their preferred gender.

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This chart shows the differences between the Defense Department's 2016 transgender policy and the 2018 update to that policy.



\* Medical Transition Treatment: Cross-sex hormone therapy, or sex reassignment.  
THIS GRAPHIC REPRESENTATION MAY NOT REPRESENT ALL CASES OR CIRCUMSTANCES.

FOR A COPY OF THE DIRECTIVE-TYPE MEMORANDUM 19-004, GO TO:  
[HTTPS://WWW.ESD.WHS.MIL/DD/](https://www.esd.whs.mil/dd/)

FOR ADDITIONAL QUESTIONS: CONSULT YOUR CHAIN OF COMMAND AND/OR YOUR SERVICE CENTRAL COORDINATION CELL

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### **Frequently Asked Questions**

**Q: Will Service members diagnosed with gender dysphoria who are considered exempt by the new policy still be eligible for sex reassignment surgeries accessed by waiver through the Supplemental Health Care Program?**

**A:** Yes. Service members considered exempt from the new policy are eligible for all necessary medical care and treatment in accordance with DoDI 1300.28 and the July 29, 2016 Assistant Secretary of Defense for Health Affairs Memorandum. These Service members would be eligible for all care offered in Military Treatment Facilities (MTFs), as well as eligible for surgeries provided through the Supplemental Health Care Program (SHCP) waiver process outlined in the Director of the Defense Health Agency (DHA) memorandum issued November 13, 2017.

**Q: What if a Service member is not exempt from the new policy and is diagnosed with gender dysphoria? Will we still provide health care?**

**A:** Yes. All Service members are entitled to health care provided by MTFs. Service members diagnosed with gender dysphoria and not exempt from the new policy may consult with a military medical provider and receive mental health counseling. Service members diagnosed with gender dysphoria who require gender transition treatment, such as cross-sex hormone therapy or sex reassignment surgery, and are unable or unwilling to adhere to all applicable standards, including the standards associated with their biological sex, will be provided medically necessary care consistent with Section 1074 of Title 10, United States Code and the July 29, 2016 Assistant Secretary of Defense for Health Affairs Memorandum for as long as the individual remains a Service member and as set forth in a medical treatment plan developed with the military medical provider and provided to the member's commander. If the Service member is to be separated from military service, appropriate action will be taken to facilitate the continuity of health care consistent with DoDI 6490.10

**Q: What if a Service member with gender dysphoria is exempt from the new policy and is undergoing transition but does not meet retention standards (e.g., >12 consecutive months non-deployable)? Will he or she be subject to separation?**

**A:** Any Service member not meeting retention standards for any reason can be subject to referral into the Disability Evaluation System (DES) in accordance with DoD Instruction (DoDI) 1332.18 or initiation of processing for administrative separation in accordance with DoDI 1332.14 or DoDI 1332.30.

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**Q: For non-exempt Service members diagnosed with gender dysphoria and unable or unwilling to serve in their biological sex, how will they be separated from service?**

**A:** This depends on the individual Service member's circumstances. Service members may not be separated solely based on a diagnosis of gender dysphoria without first being medically evaluated for possible referral to the Disability Evaluation System (DES), taking all medical conditions into consideration, or the USCG Physical Disability Evaluation System (PDES). If referral to the DES or PDES is not appropriate in accordance with applicable Instructions, a Service member may be subject to processing for administrative separation for a condition not constituting a disability.

**Q: If a non-exempt Service member is diagnosed with gender dysphoria, is the medical provider obligated to report the Service member to his or her command?**

**A:** No. Service members are generally entitled to confidential mental health assessment and treatment. Only under certain circumstances is a medical or mental health provider obligated to report a mental health condition to a Service member's command. For example, a medical or mental health provider must provide command notification if the member presents a risk of harm to self or others. As long as the Service member is willing and able to continue to serve in his or her biological gender and has no other serious mental health condition, there would be no need for a medical or mental health provider to notify the Service member's command. Should the Service member require gender transition, necessary care will be provided for as long as the individual remains a Service member, consistent with a medical treatment plan developed with the military medical provider and provided to the member's commander. As with all disqualifying medical conditions, a Service member whose ability to serve is adversely affected by a medical condition or medical treatment related to his or her gender identity or gender transition should be treated, for purposes of separation and retention, in a manner consistent with a Service member whose ability to serve is similarly affected for reasons unrelated to gender identity or gender transition.